



96TH GENERAL ASSEMBLY

State of Illinois

2009 and 2010

SB1855

Introduced 2/20/2009, by Sen. Jeffrey M. Schoenberg

SYNOPSIS AS INTRODUCED:

305 ILCS 5/Art. V-F heading new
305 ILCS 5/5F-5 new
305 ILCS 5/5F-10 new
305 ILCS 5/5F-15 new
305 ILCS 5/5F-20 new
305 ILCS 5/6-11 from Ch. 23, par. 6-11

Amends the Illinois Public Aid Code. Provides for medical assistance eligibility for persons who are: (i) age 50 through 64, or age 19 through 50 and meet certain requirements in connection with the Supplemental Security Income (SSI) program; (ii) have no medical insurance coverage; and (iii) have countable income equal to or less than 100% of the federal poverty income guidelines. Provides that these persons may be required to choose a medical home and a primary care provider. Provides that medical assistance under these provisions shall be identical to the benefits provided under the State's approved Medicaid plan, except that long-term care services shall not be covered. Requires the Department of Healthcare and Family Services to seek to maximize federal financial assistance. Effective January 1, 2010.

LRB096 05702 DRJ 15768 b

FISCAL NOTE ACT
MAY APPLY

A BILL FOR

1 AN ACT concerning public aid.

2 **Be it enacted by the People of the State of Illinois,**
3 **represented in the General Assembly:**

4 Section 5. The Illinois Public Aid Code is amended by
5 changing Section 6-11 and by adding the heading of Article V-F
6 and Sections 5F-5, 5F-10, 5F-15, and 5F-20 as follows:

7 (305 ILCS 5/Art. V-F heading new)

8 ARTICLE V-F. ACCESS TO MEDICAL ASSISTANCE

9 (305 ILCS 5/5F-5 new)

10 Sec. 5F-5. Purpose of Article. The purpose of this Article
11 V-F is to provide medical assistance to or in behalf of any
12 person who meets the eligibility conditions set forth in this
13 Article.

14 (305 ILCS 5/5F-10 new)

15 Sec. 5F-10. Eligibility.

16 (a) Any person who is not otherwise eligible for medical
17 assistance under this Code shall be eligible for medical
18 assistance under this Article if he or she meets all of the
19 following criteria:

20 (1) He or she is either:

21 (A) at least 50 years of age and not older than 64

1 years of age; or

2 (B) at least 19 years of age and not older than 50
3 years of age, has applied for federal Supplemental
4 Security Income (SSI), has been determined by the
5 Department of Healthcare and Family Services to be
6 probably eligible for SSI on the basis of disability,
7 and has not received a final administrative decision
8 from the federal Social Security Administration on the
9 most recently filed application for SSI that he or she
10 is not disabled.

11 (2) He or she has no medical insurance coverage at the
12 time of application for medical assistance.

13 (3) He or she has countable income that is equal to or
14 less than 100% of the federal poverty income guidelines as
15 updated periodically in the Federal Register by the U.S.
16 Department of Health and Human Services. A person's
17 countable income shall be determined using the methodology
18 used to determine countable income under paragraph 1(a)(i)
19 of Section 5-2 that is in effect on the effective date of
20 this amendatory Act of the 96th General Assembly.

21 (b) Notwithstanding any other provisions of this Code,
22 eligible non-citizens, as defined in Section 1-11, may qualify
23 for medical assistance under this Article regardless of when
24 they entered the United States.

1 Sec. 5F-15. Scope of coverage. The Department of Healthcare
2 and Family Services may require that persons enrolled under
3 this Article choose a medical home and a primary care provider.
4 Medical assistance under this Article shall be identical to the
5 benefits provided under the State's approved plan under Title
6 XIX of the Social Security Act, except that long-term care
7 services shall not be covered. For services provided to persons
8 for whom federal matching funds are not available, the
9 Department may establish rates of reimbursement for, and make
10 payments to, providers that are owned or operated by a State
11 agency, a State university, or a county with a population of
12 3,000,000 or more that differ from rates otherwise established
13 under this Code.

14 (305 ILCS 5/5F-20 new)

15 Sec. 5F-20. Maximization of federal assistance. The
16 Department of Healthcare and Family Services shall undertake
17 all efforts to secure federal matching funds for the costs of
18 coverage under this Article, including, but not limited to,
19 requiring that all enrollees under this Article apply for all
20 federal benefits for which they may be entitled, including
21 Supplemental Security Income.

22 (305 ILCS 5/6-11) (from Ch. 23, par. 6-11)

23 Sec. 6-11. State funded General Assistance.

24 (a) Effective July 1, 1992, all State funded General

1 Assistance and related medical benefits shall be governed by
2 this Section, except that medical assistance for individuals
3 eligible under Article V-F of this Code shall be governed by
4 that Article. Other parts of this Code or other laws related to
5 General Assistance shall remain in effect to the extent they do
6 not conflict with the provisions of this Section. If any other
7 part of this Code or other laws of this State conflict with the
8 provisions of this Section, the provisions of this Section
9 shall control.

10 (b) State funded General Assistance shall consist of 2
11 separate programs. One program shall be for adults with no
12 children and shall be known as State Transitional Assistance.
13 The other program shall be for families with children and for
14 pregnant women and shall be known as State Family and Children
15 Assistance.

16 (c) (1) To be eligible for State Transitional Assistance on
17 or after July 1, 1992, an individual must be ineligible for
18 assistance under any other Article of this Code, must be
19 determined chronically needy, and must be one of the following:

20 (A) age 18 or over or

21 (B) married and living with a spouse, regardless of
22 age.

23 (2) The Illinois Department or the local governmental unit
24 shall determine whether individuals are chronically needy as
25 follows:

26 (A) Individuals who have applied for Supplemental

1 Security Income (SSI) and are awaiting a decision on
2 eligibility for SSI who are determined disabled by the
3 Illinois Department using the SSI standard shall be
4 considered chronically needy, except that individuals
5 whose disability is based solely on substance addictions
6 (drug abuse and alcoholism) and whose disability would
7 cease were their addictions to end shall be eligible only
8 for medical assistance and shall not be eligible for cash
9 assistance under the State Transitional Assistance
10 program.

11 (B) If an individual has been denied SSI due to a
12 finding of "not disabled" (either at the Administrative Law
13 Judge level or above, or at a lower level if that
14 determination was not appealed), the Illinois Department
15 shall adopt that finding and the individual shall not be
16 eligible for State Transitional Assistance or any related
17 medical benefits. Such an individual may not be determined
18 disabled by the Illinois Department for a period of 12
19 months, unless the individual shows that there has been a
20 substantial change in his or her medical condition or that
21 there has been a substantial change in other factors, such
22 as age or work experience, that might change the
23 determination of disability.

24 (C) The Illinois Department, by rule, may specify other
25 categories of individuals as chronically needy; nothing in
26 this Section, however, shall be deemed to require the

1 inclusion of any specific category other than as specified
2 in paragraphs (A) and (B).

3 (3) For individuals in State Transitional Assistance who
4 are not eligible for medical assistance under Article V-F of
5 this Code, medical assistance shall be provided in an amount
6 and nature determined by the Department of Healthcare and
7 Family Services by rule. The amount and nature of medical
8 assistance provided need not be the same as that provided under
9 paragraph (4) of subsection (d) of this Section, and nothing in
10 this paragraph (3) shall be construed to require the coverage
11 of any particular medical service. In addition, the amount and
12 nature of medical assistance provided may be different for
13 different categories of individuals determined chronically
14 needy.

15 (4) The Illinois Department shall determine, by rule, those
16 assistance recipients under Article VI who shall be subject to
17 employment, training, or education programs including
18 Earnfare, the content of those programs, and the penalties for
19 failure to cooperate in those programs.

20 (5) The Illinois Department shall, by rule, establish
21 further eligibility requirements, including but not limited to
22 residence, need, and the level of payments.

23 (d) (1) To be eligible for State Family and Children
24 Assistance, a family unit must be ineligible for assistance
25 under any other Article of this Code and must contain a child
26 who is:

1 (A) under age 18 or

2 (B) age 18 and a full-time student in a secondary
3 school or the equivalent level of vocational or technical
4 training, and who may reasonably be expected to complete
5 the program before reaching age 19.

6 Those children shall be eligible for State Family and
7 Children Assistance.

8 (2) The natural or adoptive parents of the child living in
9 the same household may be eligible for State Family and
10 Children Assistance.

11 (3) A pregnant woman whose pregnancy has been verified
12 shall be eligible for income maintenance assistance under the
13 State Family and Children Assistance program.

14 (4) The amount and nature of medical assistance provided
15 under the State Family and Children Assistance program shall be
16 determined by the Department of Healthcare and Family Services
17 by rule. The amount and nature of medical assistance provided
18 need not be the same as that provided under paragraph (3) of
19 subsection (c) of this Section, and nothing in this paragraph
20 (4) shall be construed to require the coverage of any
21 particular medical service.

22 (5) The Illinois Department shall, by rule, establish
23 further eligibility requirements, including but not limited to
24 residence, need, and the level of payments.

25 (e) A local governmental unit that chooses to participate
26 in a General Assistance program under this Section shall

1 provide funding in accordance with Section 12-21.13 of this
2 Act. Local governmental funds used to qualify for State funding
3 may only be expended for clients eligible for assistance under
4 this Section 6-11 and related administrative expenses.

5 (f) In order to qualify for State funding under this
6 Section, a local governmental unit shall be subject to the
7 supervision and the rules and regulations of the Illinois
8 Department.

9 (g) Notwithstanding any other provision in this Code, the
10 Illinois Department is authorized to reduce payment levels used
11 to determine cash grants provided to recipients of State
12 Transitional Assistance at any time within a Fiscal Year in
13 order to ensure that cash benefits for State Transitional
14 Assistance do not exceed the amounts appropriated for those
15 cash benefits. Changes in payment levels may be accomplished by
16 emergency rule under Section 5-45 of the Illinois
17 Administrative Procedure Act, except that the limitation on the
18 number of emergency rules that may be adopted in a 24-month
19 period shall not apply and the provisions of Sections 5-115 and
20 5-125 of the Illinois Administrative Procedure Act shall not
21 apply. This provision shall also be applicable to any reduction
22 in payment levels made upon implementation of this amendatory
23 Act of 1995.

24 (Source: P.A. 95-331, eff. 8-21-07.)

25 Section 99. Effective date. This Act takes effect January
26 1, 2010.